

## ISSUE SLIP STAPLE AREA (for additional cross references)

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	24		02/09/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		43	3/2/01
RESPONSE FORMALITY REVIEW	1st	571	04/04/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date				
Final	Original	1	2	3	4
1	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓
5	✓	✓			
6	✓	✓	✓		
7	✓	✓	✓		
8	✓	✓	✓		
9	✓	✓	✓		
10	✓				
11	✓	✓			
12	✓	✓			
13	✓	✓			
14	✓	✓			
15	✓	✓			
16	✓	✓			
17	✓	✓			
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					

Claim	Date				
Final	Original	1	2	3	4
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					
63					
64					
65					
66					
67					
68					
69					
70					
71					
72					
73					
74					
75					
76					
77					
78					
79					
80					
81					
82					
83					
84					
85					
86					
87					
88					
89					
90					
91					
92					
93					
94					
95					
96					
97					
98					
99					
100					

Claim	Date				
Final	Original	1	2	3	4
101					
102					
103					
104					
105					
106					
107					
108					
109					
110					
111					
112					
113					
114					
115					
116					
117					
118					
119					
120					
121					
122					
123					
124					
125					
126					
127					
128					
129					
130					
131					
132					
133					
134					
135					
136					
137					
138					
139					
140					
141					
142					
143					
144					
145					
146					
147					
148					
149					
150					

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)